

# DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

## INVENTOR AND SPECIFICATION IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name, I believe that I am the original, first and sole inventor (*if only one name is listed below*) or an original, first and joint inventor (*if plural names are listed below*) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Graphical Data Collection Interface  
TITLE OF INVENTION

the specification of which:

X is attached hereto.

\_\_\_\_\_ was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_ (*if applicable*).

\_\_\_\_\_ was described and claimed in PCT International Application No. \_\_\_\_\_ filed on \_\_\_\_\_  
\_\_\_\_\_ and amended under PCT Article 19 on \_\_\_\_\_ (*if any*).

## REVIEW OF PAPERS AND ACKNOWLEDGMENT OF DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I do not know and do not believe that the invention claimed in the above-identified specification was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, and that the same was not in public use or on sale in the United States of America more than one year prior to this application.

I acknowledge the duty to disclose to the Patent and Trademark Office information which I know is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

## FOREIGN APPLICATIONS AND PRIORITY CLAIM

The invention claimed in the above-described specification has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to this application. I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least

one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

### DOMESTIC PRIORITY CLAIM

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States patent application(s) listed below and, insofar as this application discloses or claims subject matter in addition to that disclosed in the below listed priority applications, I acknowledge the duty to disclose to the Patent and Trademark Office all information known by me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date(s) of the below-listed prior application(s) and the national or PCT international filing date of this application.

_____ (APPLICATION SERIAL NO.)	_____ (FILING DATE)	_____ (STATUS: PATENTED, PENDING, ABANDONED)
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_____ (APPLICATION SERIAL NO.)	_____ (FILING DATE)	_____ (STATUS: PATENTED, PENDING, ABANDONED)
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### POWER OF ATTORNEY

I hereby appoint J. Nicholas Gross (Reg. No. 34,175), who is registered to practice before the Patent and Trademark Office, as my attorney with full power of substitution and revocation, to prosecute this application, to make alterations or amendments therein, to receive the patent and transact all business in the Patent and Trademark Office connected therewith.

All **CORRESPONDENCE** should be addressed to:

J. Nicholas Gross, Attorney at Law  
10950 N. Blaney Avenue Suite B  
Cupertino, CA 95014

All **TELEPHONE INQUIRIES** may be directed to J. Nicholas Gross at (408) 342-1862.

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FOR ESO 4515460

I hereby declare I have read this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**HAND PRINT DATE BEFORE SIGNING**

Full name of sole or first joint inventor Timothy Orr Knight Citizenship United States of America  
 Inventor's signature [Signature] Date October 16, 1998  
 Residence 1171 Fife Ave. Palo Alto, CA 94301  
 Post Office Address 1171 Fife Ave. Palo Alto, CA 94301

Full name of second joint inventor \_\_\_\_\_ Citizenship \_\_\_\_\_  
 Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_  
 Residence \_\_\_\_\_  
 Post Office Address \_\_\_\_\_

Full name of third joint inventor \_\_\_\_\_ Citizenship \_\_\_\_\_  
 Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_  
 Residence \_\_\_\_\_  
 Post Office Address \_\_\_\_\_

Full name of fourth joint inventor \_\_\_\_\_ Citizenship \_\_\_\_\_  
 Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_  
 Residence \_\_\_\_\_  
 Post Office Address \_\_\_\_\_

Full name of fifth joint inventor \_\_\_\_\_ Citizenship \_\_\_\_\_  
 Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_  
 Residence \_\_\_\_\_  
 Post Office Address \_\_\_\_\_

\_\_\_\_\_ If this line is checked, the signature page is continued on the attached Addendum.

(Declaration and Power of Attorney - Page 3 of 3)

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